U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

ment and the second of the

2. Fiscal Year Covered From:

1 / 1 / 2005 Through: 12 / 31 / 2005

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

|   | For Office Puse Solly |   |
|---|-----------------------|---|
|   | ( FEB 272006 )        | İ |
| E | QWS DROF              |   |

1. File Number U - 8

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

| 3. Name and address of person filing.  |  |  | 7. 144.115   | 4. Name, file number, and address of labor organization.   |  |   |   |  |
|--|--|--|--|--|--|---|---|--|
| Name                                   | Stephen  | A Vogel, Jr.   |  | Name   | Plumbers AFL   | -CIO, Local   | Union No.                                       | 16   |
|  | *  |  |  | Labor  | Organization File Nu   | ımber 019-80  | 16  |  |
| P.O. Box, Bldg., Room No., if any      |  |  | P.O. E   | P.O. Box, Building and Room Number, if any   |  |   |   |  |
|  | , 2.0g., 1.00m. 1.01, 11 a.1.  | And the state of t |  |  |  |   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,         |  |
| Street 4801 F Street                   |  |  | Street   | Street 4801 F Street   |  |   |   |  |
| City                                   | y Omaha  |  |  | City   | Omaha  |   |   | 5  |
| State                                  | Nebraska   | ZIP Code   | +4 68117   | State  | Nebraska   |   | ZIP Code + 4                                    | 68117  |
| Positio                                | on in labor organization.  | Executive Boar   | d Member   | and the second s |  | · · · · · · · · · · · · · · · · · · ·   | yng   |  |
|  |  |  |  | e  |  |   |   |  |
| \. Held                                | an interest in, engaged<br>ry value from an emplo  | in transactions (incl<br>oyer whose employ   | uding loans) with,<br>rees your organi                   | , or derived ir<br>zation repre  | ncome or other eco<br>sents or is actively   | nomic benefit of<br>seeking to repr   | f<br>esent.                                     |  |
|  |  |  |  |  |  |   |   |  |
| . Name                                 | and address of Employer  | (including trade name,   | , if any).   | 7.a. Nat   | ure of Interest, Trans   | saction, or Income  |   | and the second s |
| ,                                      | and address of Employer  | and the second s |  | Atter  | ure of Interest, Trans  adance of one- ciation of Plu  are-\$272.89  | -week semina  | r sponsored                                     | l by United  |
| Name                                   |  | and the second s |  | Atter<br>Association Airfa<br>Lodg:  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12   | -week semina  | r sponsored                                     | l by United  |
| Name<br>Trade I                        | Omaha Plumbers A   | pprenticeship  |  | Atter<br>Association<br>Airfa<br>Lodg:<br>Wages<br>\$40.0  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12<br>s-\$1,455.84<br>DO per diem x          | -week semina<br>umbers and F  | r sponsored                                     | by United  |
| Name<br>Trade I                        | Omaha Plumbers A  Name, if any:  ox, Bldg., Room No., if an  | pprenticeship  |  | Atter<br>Assoc<br>Airfa<br>Lodg:<br>Wager  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12<br>s-\$1,455.84<br>DO per diem x          | -week semina<br>umbers and F  | r sponsored                                     | l by United  |
| Name<br>Trade I                        | Omaha Plumbers A   | pprenticeship  |  | Atter<br>Association<br>Airfa<br>Lodg:<br>Wages<br>\$40.0  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12<br>s-\$1,455.84<br>DO per diem x          | -week semina<br>umbers and F  | r sponsored                                     | by United  |
| Name Trade t P.O. Bo                   | Omaha Plumbers A  Name, if any:  ox, Bldg., Room No., if an  | pprenticeship  |  | Atter<br>Association<br>Airfa<br>Lodg:<br>Wages<br>\$40.0  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12<br>s-\$1,455.84<br>DO per diem x          | -week semina<br>umbers and F  | r sponsored                                     | l by United  |
| Name Trade t P.O. Bo                   | Omaha Plumbers A  Name, if any:  ox, Bldg., Room No., if an  4801 F Street   | pprenticeship F  |  | Atter<br>Association<br>Airfa<br>Lodg:<br>Wages<br>\$40.0  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12<br>s-\$1,455.84<br>DO per diem x          | -week semina<br>umbers and F  | r sponsored<br>Pipefitters                      | l by United  |
| Name Trade t P.O. Bo                   | Omaha Plumbers A  Name, if any:  ox, Bidg., Room No., if an  4801 F Street  Omaha  | pprenticeship F  | Fund + 4 68117   | Atter<br>Association<br>Airfa<br>Lodg:<br>Wages<br>\$40.0  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12<br>s-\$1,455.84<br>DO per diem x          | -week semina<br>umbers and F  | r sponsored<br>Pipefitters                      | by United  |
| Name Trade t P.O. Bo Street City State | Omaha Plumbers A  Name, if any:  ox, Bidg., Room No., if an  4801 F Street  Omaha  | y ZIP Code   | Fund  + 4 68117  Clares, under penaltained in any accomp | Atter Association Airfa Lodg: Wager \$40.0  7.b. Am  Signature by of Perjury ar panying docum  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12<br>s-\$1,455.84<br>00 per diem x<br>ount. | -week semina imbers and F 7 days = \$2  enalties of the law imined by the sign                | r sponsored<br>Pipefitters<br>280.00<br>\$2,497 | formation  |
| Name Trade t P.O. Bo Street City State | Omaha Plumbers A  Name, if any:  ox, Bldg., Room No., if an  4801 F Street  Omaha  Nebraska  ignature and verification itted in this report (includin signed's knowledge and b | y ZIP Code   | Fund  + 4 68117  Clares, under penaltained in any accomp | Atter Association Airfa Lodg: Wager \$40.0  7.b. Am  Signature by of Perjury ar panying docum  | ndance of one-<br>ciation of Plu<br>are-\$272.89<br>ing-\$488.12<br>s-\$1,455.84<br>00 per diem x<br>ount. | week seminal material and F  7 days = \$2  The enalties of the law mined by the sign ctions.) | r sponsored<br>Pipefitters<br>280.00<br>\$2,497 | formation  |

| Name of Person Filing Stephen Vogel, Jr.   | File Number U-  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
| B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.   |   |  |  |  |  |  |  |
| 8. Name and address of Business (including trade name, if any).  | 9. Business deals with:   | ornani ara   |  |  |  |  |  |
| Name N/A  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4  10. If 9.b. or 9.c. is checked give trust or employer's name.  Name N/A  | a. Labor Organization b. Trust c. Employer  11.a. Nature of such dealing. |  |  |  |  |  |  |
| The state of the s |   | Antimentocidata  |  |  |  |  |  |
| Trade Name, if any:  |   | THE PARTY WAS A  |  |  |  |  |  |
| P.O. Box, Bldg., Room No., if any  |   | and a summary of a sum of a summary of a sum |  |  |  |  |  |
| Street   | 11.b. Approximate dollar value of such dealing.                           | \$0  |  |  |  |  |  |
| City   | 12.a. Nature of interest held or income received.                         |  |  |  |  |  |  |
| State ZIP Code + 4   |   | gayyan (ka naganlanlan) dhagailinga ma alkin dha dhi ma gamaha na ni saniil na   |  |  |  |  |  |
|  | 12.b. Amount.   | \$0  |  |  |  |  |  |
| C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money  |   | ***************************************  |  |  |  |  |  |
| 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).   | 14.a. Nature of payment.  | 991 1301 1301 1301 1301 1301 1301 1301 1   |  |  |  |  |  |
| Name N/A   | n/a   | Volendario V V Volendario V V V Volendario V V V V V V V V V V V V V V V V V V V   |  |  |  |  |  |
| Trade Name, if any:  |   | Tarapit object to control  |  |  |  |  |  |
| P.O. Box, Bldg., Room No., if any  |   |  |  |  |  |  |  |
| Street   |   |  |  |  |  |  |  |
| City   |   | and the second s |  |  |  |  |  |
| State ZIP Code + 4   |   | AND THE PROPERTY OF THE PROPER |  |  |  |  |  |
|  | 14.b. Amount of payment.  | \$0  |  |  |  |  |  |